A Total	<i>((((((((((</i>
UNITED STATES PATENT	Attorney Docket No. 15584.11
Form P1	
(Utility, Design	ION and POWER OF ATTORNEY , National Stage of PCT)
As a below named inventor, I hereby declare	
TYPE OF	DECLARATION
This declaration is of the following type:	
(Check one a	pplicable item below)
 utility patent application design patent application national stage of PCT patent app 	lication
INVENTORSI	IIP IDENTIFICATION
My residence, mailing address, and believe the inventor(s) named below to be I which is claimed and for which a patent is so	citizenship are as stated below next to my name. he original and first inventor(s) of the subject matter ought on the invention entitled:
TITLE	OF INVENTION
	AL MECHANICAL ASSEMBLY ATA STORAE ENGINES
SPECIFICATION	ON IDENTIFICATION
the specification of which: (complete	le (a), (b), or (c))
(a) [] is attached hereto.	
(b) [X] was previously filed June 27 10/540,788.	', 2005, as United States Patent Application Scrial No.
(c) [] was described and claimed in I on	PCT International Application No. filed and as amended under PCT Article § 19 on (if any).

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claim(s), as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose all information which is material to patentability as defined in 37 C.F.R. § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

FOREIGN PRIORITY CLAIM

Thereby claim foreign priority benefits under Title 35 U.S.C. § 119(a)-(d) or (f) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application(s) which designated at least one country other than the United States of America listed below and have also identified, by checking the box, any foreign application(s) for patent or inventor's certificate or any PCT international application(s) having a filing date before that of the application(s) on which priority is claimed.

(complete (d) or (e))

(d) [] no such applications have been filed.

(°,

(c) [X] such applications have been filed as follows.

Note: Where item (c) is entered above and the International Application claims priority to a non-U.S. application, check from (c), enter the non-U.S. priority details below, and make the priority claim.

COUNTRY	APPLICATION NUMBER	DATE OF FILING (month, day, year)	PRIORITY UNDER § 1	
Great Britain 0300472.8	0300472.8	January 9, 2003	[X]YES	NO[]
			[]YES	NO[]
1	1		[]YES	NO[]
nen a se ya Markamanyanyanyanyanyanyanyanya payyakki P. Albaka Arab Arab Arab — — — —	-WILL		[]YES	NO[]

POWER OF ATTORNEY

Hereby appoint as my attorneys and/or patent agents all attorneys and/or patent agents listed ander the following Customer Number, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

022913

PATENT TRADEMARK OFFICE CUSTOMER NUMBER All correspondence and telephonic communications should be directed to:

DAVID B. DELLENBACH Registration No. 39,166 Customer No. 022913 Telephone (801) 533-9800 Facsimile (801) 328-1707

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

NOTE: Carefully indicate the family (or last) name, as a should appear on the filing receipt and all other documents.

Голу		Combe
(GITEN NAME)	(MILIPLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
Inventor's signature	A-1-	
Date $\frac{20}{2}/06$	Country of Citizenship	United Kingdom
Residence <u>Dunfgrinline</u>		United Kingdom (State or Country)
Mailing Address <u>26 Broom</u>	icknowe, Dunfermline Kyll	• •

Full name of second joint inv	entor, if any			
David		Shepherd		
(GIVEN NAME)	INTIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)		
fuventor's signature	Miss She	wind		
	Country of Citizensh	ip <u>United Kingdom</u>		
Residence FDINI	SGREH	United Kingdom (State or Country)		
Mailing Address 23	LADYWELL GAR			
EDA	NRURGH EI	412 74Q		
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